

PTO  
 1785945449  
 10/16/03  
 09/22/03

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>		Attorney Docket No.	242827US2
		First Inventor or Application Identifier	Toshiyuki KIKUCHI
		Title	IMAGE FORMING APPARATUS AND IMAGE FORMING SYSTEM
(Only for new nonprovisional applications under 37 CFR 1.53(b))			

<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents</small>		ADDRESS TO:	
		Commissioner for Patents Mail Stop Patent Application Alexandria, Virginia 22313	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small>		<b>ACCOMPANYING APPLICATION PARTS</b>	
2. <input checked="" type="checkbox"/> Specification      Total Sheets <span style="border: 1px solid black; padding: 2px;">31</span>		7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113)    Total Sheets <span style="border: 1px solid black; padding: 2px;">5</span>		8. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	
4. <input type="checkbox"/> Oath or Declaration      Total Pages <span style="border: 1px solid black; padding: 2px;"> </span>		9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <small>(when there is an assignee)</small>	
a. <input type="checkbox"/> Newly executed (original or copy)		<input type="checkbox"/> Power of Attorney	
b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) <small>(for continuation/divisional with box 17 completed)</small>		<input type="checkbox"/> Copies of IDS Citations	
i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).</small>		10. <input type="checkbox"/> English Translation Document ( <i>if applicable</i> )	
5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program ( <i>Appendix</i> )		11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	
6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(<i>if applicable, all necessary</i>)</small>		12. <input type="checkbox"/> Preliminary Amendment	
a. <input type="checkbox"/> Computer Readable Form (CRF)		13. <input checked="" type="checkbox"/> White Advance Serial No. Postcard	
b. Specification or Sequence Listing on :		14. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) (2) <small>(<i>if foreign priority is claimed</i>)</small>	
i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or		15. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27</small>	
ii. <input type="checkbox"/> Paper		16. <input checked="" type="checkbox"/> Other:      Request for Priority	
c. <input type="checkbox"/> Statements verifying identity of above copies			

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

Continuation     Divisional     Continuation-in-part (CIP)    of prior application no.:

Prior application information:    Examiner:    Group Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

#### 18. CORRESPONDENCE ADDRESS

Customer Number

22850

(703) 413-3000

FACSIMILE: (703) 413-2220

Name:	Marvin J. Spivak	Registration No.:	24,913
Signature:	<i>Marvin J. Spivak</i>		Date: 9/22/03
Name:	C. Irvin McClelland	Registration No.:	

Registration Number 21,124

Docket No. 242827US2

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

INVENTOR(S) Toshiyuki KIKUCHI

SERIAL NO: New Application

FILING DATE: Herewith

FOR: IMAGE FORMING APPARATUS AND IMAGE FORMING SYSTEM

**FEES TRANSMITTAL**

COMMISSIONER FOR PATENTS  
ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	22 - 20 =	2	x \$18 =	\$36.00
INDEPENDENT CLAIMS	3 - 3 =	0	x \$84 =	\$0.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$280 =	\$0.00
<input checked="" type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$130.00
			BASIC FEE	\$750.00
			TOTAL OF ABOVE CALCULATIONS	\$916.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
<input type="checkbox"/> RECORDATION OF ASSIGNMENT			+ \$40 =	\$0.00
			TOTAL	\$916.00

Please charge Deposit Account No. 15-0030 in the amount of A duplicate copy of this sheet is enclosed.

A check in the amount of to cover the filing fee is enclosed.

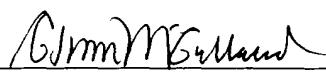
Credit card payment form is attached to cover the filing fee in the amount of **\$916.00**

The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check or credit card payment form is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,  
MAIER & NEUSTADT, P.C.

Date: 9/22/03

  
\_\_\_\_\_  
Marvin J. Spivak  
Registration No. 24,913  
C. Irvin McClelland  
Registration Number 21,124

Customer Number

22850

Tel. (703) 413-3000  
Fax. (703) 413-2220  
(OSMMN 05/03)